

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JS		2-3-00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		6-16-91	3-29

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	7/11
1	22/17
2	08/03
3	✓
4	✓
5	✓
6	✓
7	N
8	✓
9	N
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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